

**PROCEEDINGS OF THE AD HOC**  
**MENTAL HEALTH TREATMENT COMMITTEE**

Pursuant to Section 19.84, Wis. Stats., notice is hereby given to the public that an Ad Hoc Committee of the County Board of Supervisors met regarding Mental Health Treatment on Friday, April 15, 2016 in Room 365, Community Treatment Center, 3150 Gershwine Drive, Green Bay, WI

---

**Present:** Rebecca Lindner, John Gossage, Ian Agar, Erik Pritzl, Erik Hoyer, Luke Schubert, Judge Zuidmulder, Guy Zima

---

**I. Call meeting to order.**

The meeting was called to order by Vice Chair Hoyer at 12:08 pm.

**II. Approve/modify agenda.**

**Motion made by Erik Pritzl, seconded by John Gossage to approve. Vote taken. MOTION CARRIED UNANIMOUSLY**

**III. Approve/Modify Minutes of February 19, 2016.**

**Motion made by John Gossage, seconded by Erik Pritzl to approve. Vote taken. MOTION CARRIED UNANIMOUSLY**

- 1. Discussion, review and possible action: Request that Brown County review its past and present mental health services and develop a more comprehensive plan to treat both short and long-term mental health patients including but not limited to 1) alcohol and drug abuse detox and treatment; and 2) children, adolescent and adult mental health treatment.**
- 2. Discussion, review and possible action: Request that the Human Services Director and Brown County Sheriff work together to develop a plan to provide a treatment plan for prisoners who presently make up a third of our jail population.**

Both agenda items were taken at the same time. Hoyer asked for updates on the four initiatives. Human Services Director Erik Pritzl informed the mobile crisis expansion was approved by the Board. Family Services had already initiated recruitment prior to the approval but no offers were extended until after the approval. Right now the plan is to get to four mobile crisis counselors in addition to the previous staff, but as of today they are at about one. There has been some turnover of the new positions due to resignations as well as people who accepted positions but did not actually start. Family Services will continue recruitment and Pritzl is not that concerned, especially since it has only been about three weeks from approval. Since this is an expansion of current services, Hoyer asked if there will be specific training or if all staff will be cross trained to be interchangeable. Pritzl said new staff will receive the full crisis training required and then will also job shadow on the other pieces including phone training. Assistant Corporation Counsel Rebecca Lindner asked if Family Services intends to have dedicated mobile staff at all times so that the two regular people can remain in the building. Pritzl responded that Family Services has advised him that their goal is to be able to mobile out anywhere in Brown County within 30 minutes. In addition, they have mapped out their volume and are trying to get their staffing worked around that. The highest volume comes in the middle of the day and there is peak staffing for those hours.

Sheriff Gossage inquired about the contract with Family Service. Pritzl said the contract is one of the few 1/12 contracts being lump sum disbursed 12/12 each month. He said performance indicators like the 30 minute response time are the ones that Family Services said they could do, so if they are not performing, there is no financial ramification. Gossage said that as a board member of Family Services, he may bring up that people need to be hired since the County is paying for the services. Pritzl said the County pays 1/12 of the contract per month regardless of the number of staff and further, turnover issues have been happening at Family Services for a long time. Lindner felt it would be interesting to track this to see that people are being mobiled out since the money was earmarked for it. Gossage said he has talked to his officers to see if this is having an impact and was advised that they have not really seen it at a residence, but noted that Family Services is very reluctant to go to St. Vincent Hospital because they have to be invited but they are becoming more and more adept at

///

going to that location. Gossage said officers have been called out more to the hospital setting and this has helped law enforcement.

Pritzl continued that Family Services reports mobile contacts to him each month. He also talked about the issue Gossage brought up about Family Services having to be invited to St. Vincent and noted that St. Vincent is the only emergency room that does not allow mobile crisis in. Gossage has been told that if the requesting agent is St. Vincent and not law enforcement, they will allow it. Hoyer asked if there was anything that could be done to smooth this relationship. Pritzl responded that there is matter of interpretation at that facility and the liability questions is what they are concerned with. The Human Services Department is actively engaged with St. Vincent on this issue to find out what it will take to get the people into the emergency room and have them assessed so they do not have to leave the hospital and then go somewhere else to be assessed. Pritzl said they got an Attorney General opinion which pretty much left it open. They continue to work through this to try to address the hospital's concerns and Hospital Administrator Luke Schubert added that conversations have been had that DHS may support this as well.

*Ian Agar arrived at 12:16 pm*

*Judge Zuidmulder arrived at 12:17 pm*

The next part of the issue that was discussed was the detoxification services portion. Hoyer said this has been approval by the Human Services Committee and a press conference was held. This will be going to the full Board on Tuesday for final approval. Pritzl referred to the flow chart that was distributed at the last meeting and what they are currently working on is how the detoxification services are going to be used and Behavioral Health Manager Ian Agar is focusing on the incapacitation element. Pritzl said it is hard to sort out detoxification services and alcohol holds and not intertwine them as they are two pieces, but not always necessarily related. They are trying to get the focus on individuals who are incapacitated and trying to say that those are the services they will use for the situation. Agar agreed and said that when hospitals stopped doing alcohol holds for regulatory reasons, that was the gap that primarily needed to be filled. Past practice was that many people would come out to the hospital and the general consensus was that some people that were presenting as incapacitated weren't always incapacitated but it was just an expedient and convenient way to get somebody to take care of someone under the influence of alcohol. Agar continued that in developing the current protocol, they worked with Phil Steffen from the Jail as well as a Sheriff's Department representative and a representative from the Green Bay Police Department and what was clarified is that law enforcement has their own requirements in terms of what amounts to someone being incapacitated. There are a series of observations and questions that law enforcement goes through and as long as those protocols are followed, it is pretty clear who is intoxicated as opposed to incapacitated. Those people who are deemed to be incapacitated will present for medical clearance and then for detoxification. Individuals who are intoxicated do not belong in the hospital because they do not meet the criteria of incapacitation. Keeping them in the hospital would be a violation of their civil rights because they do not meet the legal definition of incapacity. Agar and his team are hoping that through judicious use of the 105 treatment episodes that are available that needs will be covered. Lindner said law enforcement does a good job of knowing the difference between intoxication and incapacitation since we have been three years without services, however, she feels details need to be worked out with with Bellin because if they bring in someone who is incapacitated, not all of the people will go to detoxification. She felt there is a good grasp on law enforcement and crisis and homeless shelters looking at resources for intoxicated people which is positive, but felt that the details about if it is going to be actually detoxification or just holds for incapacitated people has to be figured out.

Hoyer asked Gossage if this gives any insight to people that come into the jail and whether they are intoxicated or incapacitated. Gossage responded that a lot of intoxicated people come into the facility, but not too many meet the criteria of incapacitation. His staff is familiar with the people that come in incapacitated. Judge Zuidmulder said because there has been a long gap between the availability of this tool he would urge a peer review and be sure that there is enough training

to do things right. He said experience is the best teacher and if there is enough experience we will get better at it, but he felt we should meet with the agencies after 90 days to see how everything is going. He thinks it would be unfair to the boots on the ground to not review it since it is a whole new thing we are asking them to do. Hoyer agreed and said this would give law enforcement depth and learning opportunity to make adjustments. Schubert said the same recommendation was made at an EM1 meeting with Bellin. Pritzl said adding Bellin into the work group that already exists would make a nice core group.

Pritzl continued that this is not an easy conversation because the intoxicated individuals who have been brought places in the past are not really the people we are trying to address. We are trying to address the situations where there is incapacitation and chronic problems and issues that interfere with rational thoughts. It is not about any blood alcohol levels, it is really about the assessment of the individual. Agar said that violent and threatening individuals would go to the jail. Pritzl said the CTC still will play a role in this for people with co-occurring conditions, but these people do not make up the majority of the population. Hoyer asked Gossage if he could estimate how many people in the jail have alcohol problems versus drug problems. Gossage responded that there are many people with alcohol addiction along with opioid addiction but said they do run across individuals that are identified as alcohol abusers that fit that model. He noted that law enforcement officers are not the professionals in making these assessments and can only go by best practice and what they observe.

Judge Zuidmulder asked if the detox center will take everyone or just alcohol. Pritzl responded that substance is not the dictator; the dictator would be if it is medically necessary to be in the facility or if there would be another appropriate option. Hoyer asked what other options would be and Pritzl said that it could be that if people are medically stable they do not need to be in the hospital and they could be sent to another setting, home or responsible adult or linked to outpatient services. Judge Zuidmulder said the jail is not the place to detox for a number of reasons and his concern is missing a chunk of the population that comes to the jail that ultimately should not be there because it is not the staff that can take care of them this and this has to be figured out. Gossage responded that Steffen has looked at that and through their classification system as well as observations by the officers they are able to identify those that are in need of services.

The day report center was discussed next and Hoyer said that it has been approved by the Human Services Committee and there was also a very nice press conference. This will go to the full board for approval on Tuesday and assuming it is approved, the RFP process will commence. Hoyer said everyone has looked at the description of services and are satisfied as to what they may provide and what we are hoping for. Pritzl said DA David Lasee led the work group on this and there was a good mix of people working on it. Pritzl noted the RFP is already drafted and ready to go out. Gossage added that this was discussed at the Criminal Justice Coordinating Board and Judge Zuidmulder will be working with Lasee to set up criteria for when and how the day report center will be used. Hoyer asked if the entirety of the judiciary appears to be on board with using the day report center as an option. Judge Zuidmulder responded that that they are and he did not anticipate any naysayers. Pritzl said one of the concerns is where the day report center will be located and noted that the response to the RFP will have to say where they propose to have the center.

The last part of the initiative is the transitional services and they continue to look at this. Right now they are trying to identify what the cost structure is and more specifically what the program cost is versus room and board costs and how it fits within the County's facility and other facility providers. Pritzl said they are down to a couple options he can see partners that would work on this and also where capacity can exist. It is now a matter of coming up with an expense that makes sense.

Hoyer recalled an earlier discussion about providing these services in the County facility. Pritzl said that is still in the mix and it gets into how the capacity can be used to the maximum benefit of the community as well as the financial resources and this intersects with some other evaluations of the facility. He noted there is a lot of benefit in looking at using the

County facility, but also noted there are other good options as well. Schubert added they are looking at the different options and getting close to a decision as to what strategically makes the most sense.

With regard to the residential transitional housing, part of what they are looking for is to have the availability to the treatment courts to use it so when the populations are being determined, Judge Zuidmulder would like to be sure that a piece is left available to allow people in the treatment courts to be ordered there. Pritzl said Agar is going to go to the uniform placement criteria and make sure that the placement supports the assessment. Agar agreed and said that provided someone meets the assessed level of care, they can be placed in a treatment or transitional AODA facility if that is the designated level of care. He said part of the equation is funding and Pritzl agreed and said some of the people in treatment court have the barrier of funding in accessing treatment. Judge Zuidmulder thought conceptually what the residential treatment program would be is the gate to the facility for someone to go to diversion. He said they have court on Friday and if someone is in crisis but cannot be moved to residential treatment because they have not had assessments and screenings, they are sent to the jail and he thought the whole purpose of this initiative was to avoid putting people in jail. Pritzl responded that a person still has to have a program decision to be in that level of care and if they put someone in the wrong placement they could be cited which could jeopardize the County's license. Agar added that each program has oversight by the Department of Health and Human Services and there are certain CBRF regulations that need to be adhered to. Judge Zuidmulder wanted to explain that there are community needs and if the structure is so rigid that the people who need to get services cannot get services he feels that he needs to create something outside of this and argue that money goes to something outside of this that is not incumbent with all the rules and regulations so people can get the help they need. Lindner said people in a treatment court would probably already have some of those AODA assessments done and asked if there would be certain crimes that would prevent someone from being approved for the transitional housing. Agar noted that there are different levels of assessment and being in the treatment court has a different process than what may be needed to go to the residential facility, but if they meet the criteria for the residential facility, they will go there. Judge Zuidmulder said if this is going to work the treatment courts should be working with the appropriate people to be sure that the people that are in the treatment courts are prescreened to the extent it can be done so that if the need arises, it is not a long drawn out process to get someone moved quickly when they are in crisis. Pritzl said if a judge is in a position where he thinks a person is a danger to himself or others and the only safe place is jail, there is a whole different situation occurring that needs more assessment.

*Supervisor Zima arrived at 12:43 pm.*

Judge Zuidmulder said what he is saying is that if someone has all of the issues that should be here, but he would be told that the County cannot take them because of all of the criterion, the only alternative would be to put them in jail. Pritzl said this would be butting solidly up against the right of someone to refuse treatment. Judge Zuidmulder continued that his whole understanding of the reason all of this reconfiguring is being done is to open up the ability of the beds to serve people in need, but now he feels he needs to be educated on what needs to be done so he can figure out how it is going to work. He said maybe it is not really a problem, but he wants to be sure that everyone is on the same page and stated that he and Supervisor Zima and others have been very supportive of this because it was thought that this would expand opportunities for use. If it turns out that we created all of this but we still can't get people in it because of the criteria, it could be a problem.

Supervisor Zima asked how to get around this. Pritzl responded that the state Department of Health Services regulates facilities and there is no way around it. The DHS says that uniform placement criteria must be used to determine whether a person is appropriate for a level of care. Agar added that if someone presents in crisis, they are either going to go to Nicolet Psychiatric Center, or, if it is a medical emergency, they will go to a medical hospital. From there, once someone is

stabilized medically, the individual can have an AODA assessment. The AODA assessment is the second part of the assessment and the counselor makes a determination as to what level of care the person needs. As long as they meet a particular level of need, the counselor can then make a recommendation that the person go to that level of care, whether it be an outpatient program, or a residential treatment program; whichever level of care is deemed to be appropriate and this is both a medical and clinical determination.

Judge Zuidmulder said his understanding was that half of the 10 beds would be filled based on what Agar just explained but the remainder of the beds would be for people who cannot get into diversion for whatever reason, but clearly need to have this kind of immediate intervention. He is concerned because if now there is a single monolith being created of which all of these things have to happen, he does not know how useful that will be to the treatment courts because he does not know if all the criteria will be able to be met. Judge Zuidmulder said if that is the sole issue maybe going to Madison to talk to the legislature and Governor to get some sort of waiver would be appropriate. Zima felt there has to be some way around this and if it is not resolved the support of the County Board will be lost. He said the Board wants action taken when it is needed. Zima did not see any reason to have empty beds when there are people who can use them. Pritzl responded that they cannot just put people places. There has to be some way of determining this. Lindner stated the Judge can make it voluntary by saying if you want to be in the treatment court, go to the program and if you don't want to be in the program, go to jail.

Pritzl said if a person is supposed to go to diversion but diversion is full, Bay Haven is the same license as diversion. Schubert added that a person could voluntarily get into the CBRF and would have to go through an assessment to get into a program within the CBRF. Judge Zuidmulder said he does not understand this because people can be ordered to participate in programs and they can be successful. He said a Circuit Court Judge he can order someone to go to the facility and he is asking if his order would not get the people admitted. Schubert responded that he was under the impression that what was being talked about is a voluntary admission but there may be an option that is voluntary versus court ordered but the gateway would still be voluntary. Judge Zuidmulder said that he is not so concerned about how they get there, but just that they get there. He felt that if he tells people that they either go for treatment voluntarily or sit in jail, they will go for the treatment; he just wants to be sure that the service is available. Pritzl said Judge Zuidmulder could do exactly what he described and give people the choice of doing this instead of that. Judge Zuidmulder wanted assurance that the Sheriff's Department would be notified immediately if people walk out of the facility because the moment they walk out there will be an apprehend forthwith bench warrant. He wants to be sure that people do not just come here to appease the Judge and then walk away and do something that is troublesome to public safety. Judge Zuidmulder said the population being talked about all chatter between themselves and if they think that they can come to the CTC and sign in to avoid going to jail and then walk out later in the day and have the weekend to do what they want to do, the whole system will collapse very, very quickly. However, the first one who does this and goes to jail should solve the problem.

Pritzl said this is very good conversation for him and Schubert to hear. He said they have two different regulatory models. There is a transitional residential treatment model which requires a detox stay before admission. With what the Judge is describing, there would be prohibition on the flexibility which would be an issue. There is another model that would make more sense. Judge Zuidmulder said there also needs to be conversation about the fact that this state is on the cutting edge with regard to treatment courts and doing everything we are talking about. He is satisfied that if Brown County brings an explanation to the public officials who serve in the legislature and the Governor's office of how we want this designed to address this population, visive a court order, he thinks legislation would be passed in a heartbeat in both houses and by the Governor. The conversation would be that the professionals see what is standing in their way but they can see that this system would be useful and explain how the system needs to be in place to allow this population not to go through all the hoops. Pritzl would have that conversation with the person in the room and noted that at some point that person has the right to talk about what they want to happen as well and Pritzl said that what is missing is determining what will get a person to engage in treatment. Judge Zuidmulder said that if someone is mentally ill, it should not be assumed that they

know what they should be doing. Further, it is his opinion that if they are violating the law and are creating a problem in the quality of life and public safety, they forfeit that. The whole purpose of all of this is to move from the notion that they get thrown in jail, but we should also not be faced with a system that is thinking solely about a rational person and what a rational person should do and does not address the populations that law enforcement and the Judge has to deal with on a daily basis. Judge Zuidmulder said that they are talking about people whose characteristics have exacerbated to the point where there has had to be a legal intervention and they have been convicted of a crime for which they could forfeit all their personal liberties, not the people who are thinking rationally. Agar was glad to hear the Judge say this because when we talk about patients that have admissions to hospitals and access to treatment, they think of them in different categories. There are patients that are ordered to treatment, but there are other patients that they deal with on a voluntary basis. In order to provide treatment to those people, they need an informed consent which means that the person has to know the advantages and disadvantages of treatment and they have to agree to them. Agar said that they cannot force someone on a voluntary basis to be treated. Zima asked if a court order would trump this. Agar responded that there will be people that Judge Zuidmulder has jurisdiction over to order to treatment. Pritzl said the question is how someone can be coerced to go to treatment legally; whether it is criminal conviction or if it would be a Chapter 51 situation. Judge Zuidmulder said that this will require a lot of conversation and he is seeing that the people in the mental health services area are focused on a clientele and a way of doing business. But now what they're being impacted on are public funds being made available for another population that has to be addressed, similar to a round peg in a square hole. Judge Zuidmulder said that it does not sound to him that they want to use the money for what the community is excited about. He said that that is no disrespect to the people being discussed and Zima added that we are not here to subsidize the other operation; we are here to fund a new program.

Zima felt somewhere along the line society has to figure out how to get things done and the current bureaucracy is anti-helping society. He said this is something new and they are trying to solve the situations for the troubled population and these are people who are already under the force of law because they have been arrested for something. These are people in the system and county services are being contracted to fulfill the need. Zima told Pritzl to do whatever has to be done and it will be passed. He does not want to listen to this over and over because people will lose interest. He wants them to find a way to get done what needs to be done. If changes to the State law need to be made, Zima wants to know so they can work on it. He said that what he is talking about is having the treatment be the punishment for these people in need and Zima is hoping that from that treatment people are kept out of jail and make more productive citizens. He knows that they will not all be success stories, but some of them will be successful and those are the ones that make him feel good and keep doing the things he's doing. This is the first step and he is happy to be re-elected so he has two more years to help build this program up. Pritzl said that everyone seems to have the same broad big goals, but noted that they are just getting started on something that they have not done before to try to see how it fits with the facility and how the needs can be addressed to get started. Zima wants Pritzl to find solutions and not roadblocks. Pritzl responded that they are finding solutions by getting over the roadblocks that they know exist.

Lindner said she is pretty involved in this system and would like more concrete examples of what populations are being talked about and exactly what the Judge wants and what the treatment people want. Judge Zuidmulder said that diversion has been the most useful tool he has, but there are a limited number of resources and a limited time period. People are leaving diversion not because they are necessarily ready, but rather because there is a specific amount of time they can be in diversion and then they are out. His understanding of the extra beds was that it would be an additional tool to be used to fill that problem. When people move out of diversion, many times they are homeless. Judge Zuidmulder said that the treatment court team determines a person is in crises and needs to be monitored and have treatment, but at the end of the period of time, they have to leave and they have not been satisfied that when they are leaving they are ready. He thought that the beds being talked about would be used to move people from the diversion into the other beds. Agar informed that they have to follow state regulations which say that a person needs to be there as long as needed to stabilize them which could be hours or days or weeks, but typically not months. What Zima wants is the follow-up care. Agar said that follow -

up would be linkage with services such as AODA counselors, an outpatient program or an inpatient treatment. He asked if the need is housing or treatment or both and Zima and Judge Zuidmulder said that both are needed. Judge Zuidmulder said that if a program is created that cuts off the kinds of things he is talking about, he cannot support it because it does not do any good and he does not think funding will continue.

Pritzl said the discussion on transitional housing was to talk about what to do after detoxification, separate from the treatment court. Judge Zuidmulder recalled hearing about 15 additional beds and it was communicated to him that those would be the beds available to the treatment courts, but now it seems like it is different. Now it seems like these beds are all for a single population and have a single criteria and can only be used on that basis. Judge Zuidmulder is not comfortable with this, because that is not what he thought was going to happen. Pritzl said that they can look at this and noted that you can have multiple program certifications in the same facility but it would have to be figured out how to move people within those programs to determine that the person is in the right place and in the right program. Judge Zuidmulder felt that everyone has the right desires, but need to have more intense conversations about the criteria to be sure that the people who are supporting these services are in fact having access to them. Zima reiterated that Pritzl just needs to tell him what he needs and he will try to do it. Pritzl added that he is also interested in meeting the needs of the treatment court population. Judge Zuidmulder felt that it is public support which Human Services needs to encourage and to generate as much as they can and they can only do that by partnering and being sure that the people in the community looking for flexibility and openness know that their needs are being met and addressed. He felt that if we get to the point where neither Judge Zuidmulder nor Zima understand how anyone they think should be in the facility can get in, it will not be good. Zima said that Pritzl and his team need to make the most of this and the best advocates are right in this meeting. He said that there is a window of opportunity to do something and it should not pass. Zima said that this is a mission for Judge Zuidmulder and himself and they want to solve the problems. If there are bureaucratic problems that need to be handled at the State level, then they can start working on that. Zima really wants to do a lot more than what they are talking about and said there also needs to be a way to handle people who have problems but are not arrested.

Pritzl asked what will be done when someone is no longer cooperating with their treatment plan and does not want to be there anymore. He wants to make sure that they are not going to continue to house them with no treatment occurring. Judge Zuidmulder explained that what would happen is the person will come before the Judge and someone from Human Services will be involved, and then a decision will be made. If the person promises to go back for treatment, they will be sent back and Human Services will keep the Court advised of progress. If there is no progress, the person would come back before the Court and if they need to be terminated from the program, they will be terminated and they would go back to prison or jail. Pritzl said that this eases his mind. Agar said that one of the things he hears over and over is that some years ago Brown County used to have a facility where people with mental health conditions or AODA situations could be provided supportive services by case managers who assisted them and pointed them in the right direction to lead productive lives. This was an unlicensed venue and was county owned and funded so there were no state or federal dollars involved. What he hears over and over is a desire for someone to have a place to live and he feels that this is what is lacking in the continuum of care because there are places for people to get treatment but sometimes the issue is where a person can reside, but diversion is not that place. Diversion is intended for short-term stabilization to get them back on their feet quickly and then send them back home. It is Agar's opinion that there needs to be a catchall place for people to go when they are still looking for employment or when their economic situation is questionable and that place is not a licensed treatment facility. Judge Zuidmulder said that he is not advocating that people come to diversion because they have no housing as that would be a tremendous insult to the staff as well as the community resources. He felt that what Agar has described is a continuing social issue which affects not only people in the treatment courts, but every offender and every person coming out of prison. Judge Zuidmulder said that this is a separate social problem which plagues him and the other treatment court judges every week. He would like to solve the current problems they are talking about, and then maybe they can solve the housing problems in the future, but right now the housing problems have nothing to do at all with what he is asking the Human Services Department to do. Judge Zuidmulder asked for the benefit of Human Services to set the

housing issues aside and not let their opinion of what is being done be clouded by the fact that it is interpreted as being housing, because that is not what it is.

The next meeting date was discussed and May 16 at noon was set. The meeting will be held at the Sophie Beaumont building.

**Motion made by John Gossage, seconded by Erik Pritzl at 1:26 pm. Vote taken. MOTION CARRIED UNANIMOUSLY**

Respectfully submitted,

Alicia Loehlein	Therese Giannunzio
Recording Secretary	Transcriptionist